

Lobbying Supplemental Registration Form

To be used for changes to registrations and terminations.

344
Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6631. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

1. NAME REGARD Jules Jr.

First

MI

2. BUSINESS PHONE 752 33803. BUSINESS ADDRESS 1164 Longmeadow BLR LA Zip 70816
Street and No. City State ZipMAILING ADDRESS P O Box 80715 BR LA Zip 70898
Street and No. City State Zip4. EMPLOYER Self5. EMPLOYER'S ADDRESS _____
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes _____ No _____

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name DE-YOR CorporationAddress 7620 MARKET STREETBusiness or purpose General BusinessBroadman 6th
44512 New RepresentationDoes this person pay you? Yes

If No, who pays you? _____

 Terminated Representation as of _____**HAND DELIVERED**

SUPPLEMENTAL REGISTRATION FORM

Lobbyist's Registration Number _____

2. Name _____

Address _____

Business or purpose _____

New Representation

Does this person pay you? _____

If No, who pays you? _____

Terminated Representation as of _____

3. Name _____

Address _____

Business or purpose _____

New Representation

Does this person pay you? _____

If No, who pays you? _____

Terminated Representation as of _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act (LSA-R.S. 24:50 et seq.) has been deliberately omitted.


Signature of Lobbyist